Ensuring equitable access to health care: Strategies for governments, health system planners, and the medical profession

https://policybase.cma.ca/link/policy11062

POLICY TYPE
Policy document

LAST REVIEWED
2018-03-03

DATE
2013-12-07

TOPICS
Health systems, system funding and performance
Population health, health equity, public health
Improving efficiency in the Canadian health care system

https://policybase.cma.ca/link/policy11525

POLICY TYPE
Policy document

DATE
2015-05-30

TOPICS
Health systems, system funding and performance

Documents
Joint Canadian Medical Association & Canadian Psychiatric Association
Policy - Access to mental health care
https://policybase.cma.ca/link/policy11890

POLICY TYPE
Policy document

DATE
2016-05-20

TOPICS
Health care and patient safety
Population health, health equity, public health

Documents
Joint position statement: Principles to guide health care transformation in Canada
https://policybase.cma.ca/link/policy10218

POLICY TYPE
Policy document

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2018-03-03

DATE
2011-07-27

REPLACES
PRINCIPLES TO GUIDE HEALTH CARE TRANSFORMATION IN CANADA

TOPICS
Health systems, system funding and performance

Documents
Management of physician fatigue
https://policybase.cma.ca/link/policy11127

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Policy document

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2014-05-24

TOPICS
Health human resources

Documents

CMA POLICY

MANAGEMENT OF PHYSICIAN FATIGUE

Policy

The Canadian Medical Association encourages RCMs to develop or support policies which will enable health care physicians to avoid the risks of physician fatigue. This risk should be managed by creating environments in which physicians can manage their own workload and role within the work environment.

Definitions

Physician Fatigue

Physician fatigue refers to the condition caused by the effects of prolonged and repetitive physical and mental strain that affects a physician's ability to function optimally in the workplace.

Epidemiology

Physician fatigue is a recognized problem in the medical profession. It can lead to a variety of negative outcomes, including increased risk of errors, reduced productivity, and decreased job satisfaction.

Incidence

Physician fatigue has been found to be prevalent among physicians, with studies indicating that up to 70% of physicians report experiencing fatigue to some degree.

Prevalence

Physician fatigue is more common among certain groups of physicians, such as those working in intensive care units or emergency rooms.

Risk Factors

Risk factors for physician fatigue include long hours, high workload, and a lack of control over work environment.

Management

Physicians should be encouraged to take steps to manage their workload and reduce the risk of fatigue. This may include taking breaks, managing time, and seeking support from colleagues.

Conclusion

Physician fatigue is a serious issue that needs to be addressed by the medical profession. By implementing policies that encourage physicians to manage their workload and reduce the risk of fatigue, we can help ensure that they are able to provide the best care possible for their patients.
Operational principles for the measurement and management of wait lists (Update 2011)

https://policybase.cma.ca/link/policy10322

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2011-10-23

REPLACES
Operational principles for the measurement and management of waiting lists

TOPICS
Health systems, system funding and performance

Documents
The physician appointment and reappointment process 2016

https://policybase.cma.ca/link/policy13564

POLICY TYPE
Policy document

DATE
2016-12-03

TOPICS
Health human resources
Physician practice, compensation, forms

Documents
Principles for Health System Governance

Documents

Principles for Health System Governance

The Canadian Medical Association (CMA) supports the concept of public health system governance as a means of improving the effectiveness of health care delivery and promoting the health of Canadians. Public health system governance is defined as the process by which public policies, programs, and services are planned, designed, and delivered to meet the health needs of the population. The principles for health system governance identified below are intended to guide the development and implementation of public health system governance strategies.

1. Principle of Accountability: Public health system governance must be accountable to the public for the health outcomes achieved.
2. Principle of Equity: Public health system governance must ensure that all members of the public have access to health care services and information that are needed to achieve and maintain good health.
3. Principle of Efficiency: Public health system governance must ensure that health care services are provided in an efficient and effective manner.
4. Principle of Flexibility: Public health system governance must allow for flexibility in the provision of health care services to meet the needs of different populations.
5. Principle of Transparency: Public health system governance must ensure that the decision-making process is transparent and that the public is informed about the outcomes of these decisions.
6. Principle of Collaboration: Public health system governance must involve collaboration between all stakeholders, including government, health care providers, and the public, in the design and delivery of health care services.
7. Principle of Integration: Public health system governance must ensure that health care services are integrated and aligned with the needs of the population.

The CMA urges governments to adopt these principles of public health system governance to improve the effectiveness of health care delivery and promote the health of Canadians.
Streamlining patient flow from primary to specialty care: a critical requirement for improved access to specialty care

https://policybase.cma.ca/link/policy11299

POLICY TYPE
Policy document

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2020-02-29

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2014-10-25

TOPICS
Health systems, system funding and performance

Documents